

## Dr. Stephanie Bailey Receives National Awards for Outstanding Public Health Service

The American Medical Association (AMA) and the American Public Health Association (APHA) have each bestowed prestigious awards to Stephanie B.C. Bailey, M.D., Director of Health for Nashville and Davidson County.

The AMA will award Dr. Bailey one of its Dr. Nathan Davis Awards for Outstanding Government Service on March 15. The awards are named for the founder of the AMA and are presented to those at the national, state, and local government level who promote the art and science of medicine and the betterment of the public health. United States Senator Bill Frist and Florida Governor Jeb Bush are among previous Dr. Nathan Davis Awards winners.

"After reviewing the award criteria there is no question that Dr. Bailey was a perfect match," said Robert B. Eadie, deputy director of the Metro Public Health Department. "She is an outstanding public health leader, has high personal integrity, and has developed targeted initiatives that have greatly benefited Nashville."

The AMA award comes after the APHA awarded Dr. Bailey the prestigious 2004 Roemer Award for innovative public health initiatives pioneered by Nashville's Director of Health. The Milton & Ruth Roemer Prize for Creative Local Public Health Work is awarded to a local public health officer of a county, city, or other unit of local government, who has been found to be responsible for outstanding creative and innovative public health work. The award was endowed by two devoted members of the APHA. The annual award honors those whose public health efforts are intended to protect, advance, or recover the health of the general population or special populations.

Edward Baker, M.D., former Director of the Centers for Disease Control and Prevention's (CDC) Public Health Program and Practice Office and current Director of North Carolina Institute for Public Health, was one of many of



Dr. Stephanie B.C. Bailey, Director of Health

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Dr. Bailey's public health peers nationally that provided support for Dr. Bailey. In a letter to the APHA, Dr. Baker stated that Dr. Bailey is an outstanding and widely respected national public health leader. As a senior advisor for Dr. Baker, Dr. Bailey co-chaired a major national CDC taskforce on workforce development that shaped national public health policy.

"Dr. Bailey's passion for improving the health of all people in her community has been the foundation of every initiative she has taken on as her own," said Mary Selecky, Secretary of Health for the Washington Department of Health. "Nashville, the state of Tennessee, the nation, world, and public health are well served by Dr. Bailey's dedication."

Dr. Bailey was the first to convene a group of health care providers to address an estimated 60,000 uninsured Davidson County residents. She was elected to chair the Consortium of Safety Net Providers which launched Bridges to Care (BTC) in February 2002. BTC's goal is to link uninsured Nashville residents to one of the several member clinics for on-going primary health care. Today, more than 20,000 community members have access to 16 primary medical care clinics that serve patients based on their ability to pay. Prior to BTC, many of the uninsured would go to hospital emergency departments seeking non-emergency primary health care. Bridges to Care links the uninsured to an on-going source of primary health care, a "medical home".

Dr. Bailey's vision of public health regional teams in Nashville led to the development of STD Free! — a syphilis elimination effort that received national attention and funding from the CDC. Thanks to the targeted awareness and testing program, Nashville has dropped from having the highest syphilis rate in the country four years ago to outside of the top 20 cities in the nation today. The STD FREE! model created in Nashville has been replicated in other cities today who are fighting to eliminate syphilis.

Dr. Bailey established the first Youth Advisory Board in Metro Government history, recognizing youth's input is valuable to the prosperity of the community.

Dr. Bailey joined the Metro Public Health Department as a physician in 1981. She has served as medical advisor for the East Nashville Health Center and the department's medical director. She was named Director of Health in 1995.

Dr. Bailey is the past president of the National Association of County and City Health Officials, an organization representing the more than 3,000 local health departments across the nation. She serves on the Board of Directors for the Nashville Academy of Medicine, the Oasis Center, and Character Counts. Dr. Bailey just completed a six year term as a board member for the United Way of Middle Tennessee. She has served on three national committees: the National Advisory Board to the director of the CDC, the National Advisory Council for the Elimination of Tuberculosis, and the National Rural Health Committee.

## **Notifiable Diseases 2004**

### *Editor's Note:*

The provisional 2004 year end notifiable disease data is presented on page 6 of this newsletter. Following is additional information for selected diseases.

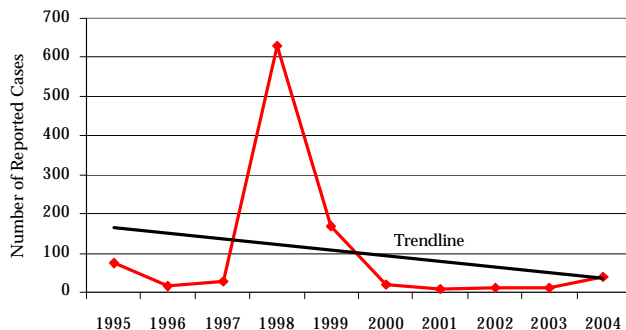
### ***Shigellosis/Gastrointestinal Diseases***

Davidson County and surrounding counties experienced a significant increase in reported cases of shigellosis in 1998 as indicated in Figure 1 on page 3. Since 1998, the trend in reported cases has been downward until 2004. Beginning in October of 2004, the number of reported cases began to increase and has continued through January of 2005 prompting Metro Public Health Department to issue a communicable disease alert on January 12, 2005. These new cases have been observed primarily among daycare and elementary school children and no common source has been identified. Person-to-person spread by the fecal-oral route is the suspected mode of transmission in the current outbreak and good handwashing habits are encouraged to try to control spread of the disease.

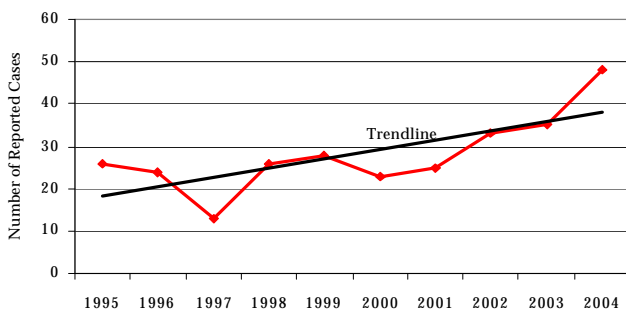
Among the other notifiable diseases which are gastrointestinal in nature, there has been only slight fluctuations in the numbers of cases reported each year for salmonellosis, *E. coli* 0157:H7, and campylobacteriosis. Salmonellosis is the second most frequently reported gastrointestinal disease following shigellosis. However, the number of cases reported annually did not vary significantly from 1995 to 2004 averaging 57.1 cases per year. For campylobacteriosis, the number of cases has ranged from a low of 13 to a high of 41 for an average of 30 reported cases per year during the 10-year period. There were 36 cases of *E. coli* 0157:H7 reported in the ten years examined. The number of cases of giardiasis re-

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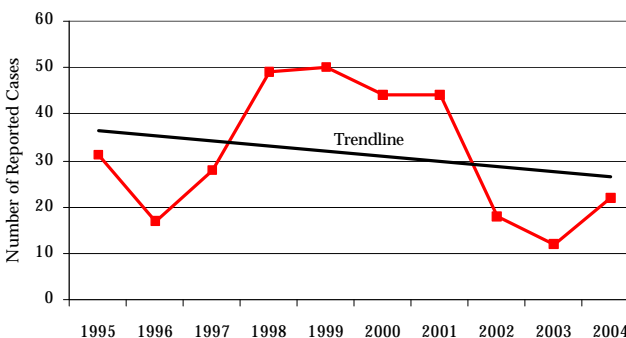
**Figure 1. Reported Cases of Shigellosis by Year, Nashville, TN, 1995 - 2004**



**Figure 2. Reported Cases of Giardiasis by Year, Nashville, TN, 1995 - 2004**



**Figure 3. Reported Cases of Hepatitis A by Year, Nashville, TN, 1995 - 2004**



ported, however, has risen during the 10-year period from a low of 13 cases in 1997 to the 48 cases reported in 2004 (Figure 2).

### Hepatitis

Figure 3 displays the reported cases of hepatitis A over the past 10 years. As with shigellosis, although the general trend is downward, there was an increase in reported cases of hepatitis A from 2003 to 2004 (from 12 to 22 cases). The Healthy People 2010 Objective for hepatitis A is 4.5 new cases per 100,000 population. In 2004 (utilizing provisional data), Nashville's new case rate was 3.7 per 100,000 population<sup>1</sup>.

Reported cases of acute hepatitis B over the past ten years has declined from the 303 cases reported in 1995 to 12 cases in 2004, a 96% decrease. The number of pregnant women with acute hepatitis B has ranged from a low of 18 cases (reported in 1998 and 2001) to a high of 43 cases in 2004. (Data available from 1998 - 2004.) Data is available for acute hepatitis C from 1998 through the present. The numbers of reported cases has ranged from a low of one case to a high of 22 cases in 1999. The Healthy People 2010 objective for acute hepatitis C is 1 new case per 100,000 population. The new case rate in Nashville for 2004 (utilizing provisional data) was 0.17 per 100,000 population<sup>1</sup>. Although chronic hepatitis C infection is not reportable to the Health Department, some data is available pertaining to the disease. Since 1998, over 2,100 cases of chronic hepatitis C have been confirmed.

### Tuberculosis

In 1997, Nashville had 91 reported new cases of tuberculosis, the most of any year in the ten years presented in Figure 4. From 1997 to 2004 (51 reported cases provisional data), Nashville has experienced a 44% de-

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# Index to Articles in *Public Health Watch* 2004

**Editor's Note:** The following is a listing of articles by issue, title, author, and page number for year 2004.

<u>Title of Article</u>	<u>Author</u>	<u>Page Number</u>
<b>January/February 2004</b>		
Meeting the Mark?: Nashville Youth and Healthy People 2010 Objectives (Second in a Series)	Tameka Jobe	1
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What's the Difference? Exploring the Racial Differences between Nashville Youth and Their Involvement in Risk Behaviors (Last in a Series)	Tameka Jobe	1
Report from the Davidson County Child Death Review Team, 2002	Brook McKelvey	1
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Prevalence of Influenza Vaccination in a High Risk Population: Impact of Age and Race	Rhonda BeLue	1
Community Scholars Partnership Program: Catalyzing Communities Towards Healthy Lifestyles	Rhonda BeLue	3
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<b>July/August 2004</b>		
NO ISSUE		
<b>September/October 2004</b>		
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<b>November/December 2004</b>		
Who Should Be Vaccinated During the 2004 - 2005 Flu Season?	Nancy Horner	1
Signs and Symptoms of Influenza		1
Knowledge, Attitudes, and Behaviors Regarding Influenza Vaccination	Rhonda BeLue	2
Peak Months for Flu Activity	Nancy Horner	3
Influenza Vaccine Update From Metro Public Health		

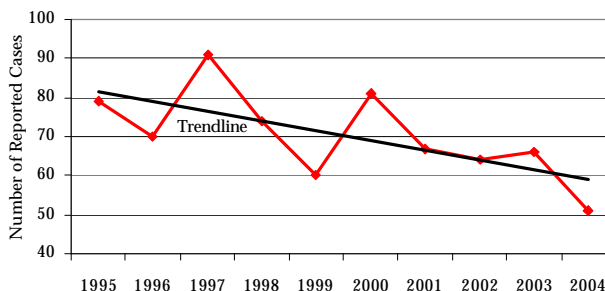
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crease in reported new cases. The target for Healthy People 2010 for tuberculosis is 1.0 new case per 100,000 population. In Davidson County in 2004, there were 8.7 new cases per 100,000 population<sup>1</sup>.

<sup>1</sup> Rate calculated using Tennessee Department of Health 2004 projected population data.

*The next issue of "Public Health Watch" will present additional information on sexually transmitted diseases reported during 2004.*

**Figure 4. Reported Cases of Tuberculosis by Year, Nashville, TN, 1995 - 2004**



### **Mission of Public Health Watch**

*Public Health Watch's mission is to promote improvement of the health of the public in Davidson County by:*

- Producing a newsletter that is timely, credible, easy to read, and that addresses a broad range of public health topics of interest to the Davidson County community;
- Disseminating information regarding community health status in Davidson County;
- Promoting awareness of public health initiatives;
- Providing a forum for practitioners of public health and concerned citizens to discuss issues of public health importance; and
- Educating a diverse readership on the importance of public health efforts to protect personal and environmental health.

### **Matthew Walker Hosts Health and Wellness Jubilee**

In support of *Cover the Uninsured Week*, Matthew Walker Comprehensive Health Center will host a Community Health and Wellness Jubilee on Saturday, May 7, 2005, from 10:00 a.m. until 2:00 p.m. at 1035 14th Avenue North. This event will provide information to the uninsured, insured, and underinsured patients about healthy options and provide resources to answer any questions. We will provide information about living a healthy lifestyle through exercise, food, and doctor visits. Matthew Walker Comprehensive Health Center and Nashville REACH 2010 will host a Healthy Dish Competition during this event to show the importance of preparing healthy meals. There will be medical and dental screenings, health information booths, healthy vendor booths, and fitness demonstrations for the elderly as well as the young. If you would like additional information, please call 615-340-1289.

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#### **Title of Article**

#### **Author**

#### **Page Number**

Department as of December 7, 2004  
Protect Yourself Against the Flu...There are things you can do whether you take the flu vaccine or not  
Reported Cases of Selected Notifiable Diseases for September/October 2004

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## Reported Cases of Selected Notifiable Diseases for Nov/Dec 2004

Disease	Cases Reported in November/December		Cumulative Cases Reported through December	
	2003	2004	2003	2004
AIDS	40	37	274	267
Campylobacteriosis	2	2	19	33
Chlamydia	445	511	2,650	2,586
DRSP (Invasive drug-resistant <i>Streptococcus pneumoniae</i> )	4	4	25	19
<i>Escherichia coli</i> 0157:H7	0	1	0	5
Giardiasis	13	5	31	48
Gonorrhea	227	236	1,491	1,195
Hepatitis A	3	4	11	22
Hepatitis B (acute)	3	4	23	12
Hepatitis B (perinatal)	6	5	31	43
HIV	39	57	306	322
Influenza-like Illness	1,270	1	2,191	187
<i>Neisseria meningitidis</i> disease	2	0	1	1
Salmonellosis	6	3	47	52
Shigellosis	2	23	12	38
Syphilis (primary and secondary)	3	2	21	15
Tuberculosis	17	8	66	51
VRE (Vancomycin-resistant enterococci)	10	12	48	33

### To report a notifiable disease, please contact:

Sexually transmitted diseases: Brad Beasley at 340-5676

Tuberculosis: Alisa Haushalter at 340-5650

AIDS/HIV: Mary Angel-Beckner at 340-5330

Hepatitis C: Pat Sanders at 340-5632

Hepatitis B: Denise Stratz at 340-2174

Vaccine-preventable diseases: Mary Fowler at 340-2168

All other notifiable diseases: Pam Trotter at 340-5632

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**Nashville, TN 37203**

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